ORG 8856

Manufacturer and Product Identification

		facturer's Information	Submission Type: Initial Revision
Full Name of Company:	ALL SOUTH EQU	IPMENT CO. INC	
All Company DBAs:			
-			
Company Principal Officer:	STUART RUBIN		PRESIDENT
	Last	First	Position
Company Address: [SUITE 201 18822	Whyte Hardee Blv	d Hardeeville,SC29927
- 		Street, Suite No., P.O. Box No.	
mailing	address P.O. BOX	1227 Bluffton	,sc 29910
City			untry Postal Code
Company Contact	843 784 3198	843 784 3199 k	imquip@aol.com
Info.:	Telephone	Facsimile	E-mail
	Load lugger t	railers	
	Web S	ite	
Submitted by Company Official:	Stuart Rubin	Preside	nt 7/31/2013
Official.	Printed Name	Company F	Position Date
	\sim		
	MAD A		
_	Signature		
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What Type of Vehicle Manufacturer or Alterer is Your	
Note: If you are a completed vehicle or incomplete vehicle manufacturer, you must ais	
Completed Vehidle Manufacturer - a manufacturer of vehicles that require no further manufacturer	acturing operations to perform their intended function
☐ Incomplete Vehicle Manufacturer - a manufacturer of incomplete vehicles, as defined above	*
Intermediate Manufacturer - a manufacturer (other than the incomplete vehicle manufacture operations on a vehicle manufactured in two or more stages Final-Stage Manufacturer - a manufacturer who performs such manufacturing operations of	n an incomplete vehicle that it becomes a completed vehicle
Alterer - a person who alters by addition, substitution, or removal of components (other that first purchase of the vehicle other than for resale Instructions for Completing, Revising, and Su	1945 1947
49 CFR Part 566 requires that a manufacturer of motor vehicles and regulated motor vehicle equipment items submit to NHTSA not later than 30 days after manufacturing begins, information about the company and the products it manufactures. This suggested form will assist a manufacturer to comply with Part 566. Please complete the form by typing or clearly printing. Each manufacturer who has submitted this information must keep its entry current, accurate, and complete by submitting revised information not later than 30 days after the relevant changes in its business occur.	Mail the completed form to: Attention: VIN Coordinator National Highway Traffic Safety Administration 1200 New Jersey Avenue, SE West Building, Room W45-207 Washington, DC 20590 Fax: 202-366-3081